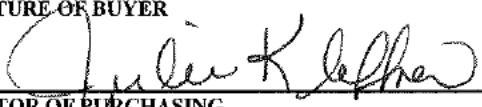
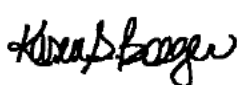




NOTICE OF CONTRACT RENEWAL

State Of Missouri
Office Of Administration
Division Of Purchasing
PO Box 809
Jefferson City, MO 65102-0809
<http://oa.mo.gov/purchasing>

CONTRACT NUMBER CS170042001	CONTRACT TITLE Alternatives to Abortion Program Services
AMENDMENT NUMBER Amendment #002	CONTRACT PERIOD July 1, 2017 through June 30, 2018
REQUISITION/REQUEST NUMBER [REDACTED]	SAM II VENDOR NUMBER/MissouriBUYS SYSTEM ID [REDACTED]
CONTRACTOR NAME AND ADDRESS ALLIANCE FOR LIFE – MISSOURI INC 106 5TH AVE S PO BOX 65 GREENWOOD MI 48034-8627	STATE AGENCY'S NAME AND ADDRESS Department of Social Services Division of Finance & Administration Sys 221 W High Street, Room 310, PO Box 1082 Jefferson City MO 65102-1082
ACCEPTED BY THE STATE OF MISSOURI AS FOLLOWS: Contract CS170042001 is hereby amended pursuant to the attached amendment #002, dated 08/11/17.	
BUYER Julie Kleffner	BUYER CONTACT INFORMATION Email: julie.kleffner@oa.mo.gov Phone: (573) 751-7656 Fax: (573) 526-9816
SIGNATURE OF BUYER 	DATE 8-22-17
DIRECTOR OF PURCHASING  Karen S. Boeger	



STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF PURCHASING
CONTRACT RENEWAL

AMENDMENT NO.: 002
CONTRACT NO.: CS170042001
TITLE: Alternatives to Abortion Program Services
ISSUE DATE: 07/31/17

REQ NO.: [REDACTED]
BUYER: Julie Kleffner
PHONE NO.: (573) 751-7656
E-MAIL: Julie.Kleffner@oa.mo.gov

TO: ALLIANCE FOR LIFE - MISSOURI INC.
106 5TH AVE S PO BOX 65
GREENWOOD MI 64034-8627

RETURN AMENDMENT BY NO LATER THAN: 08/14/17 AT 5:00 PM CENTRAL TIME

RETURN AMENDMENT TO THE DIVISION OF PURCHASING (PURCHASING) BY E-MAIL, FAX, OR MAIL/COURIER:

SCAN AND E-MAIL TO:	Julie.Kleffner@oa.mo.gov
FAX TO:	(573) 526-9816
MAIL TO:	PURCHASING, P.O. Box 809, Jefferson City, Mo 65102-0809
COURIER/DELIVER TO:	PURCHASING, 301 West High Street, Room 630, Jefferson City, Mo 65101-1517

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Missouri Department of Social Services
Division of Finance and Administrative Services
221 W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

SIGNATURE REQUIRED

VENDOR NAME	MissouriBUYS SYSTEM ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN)
Alliance for Life - Missouri, Inc.	[REDACTED]
MAILING ADDRESS	
PO Box 65	
CITY, STATE, ZIP CODE	
Greenwood, MO 64034	

CONTACT PERSON	EMAIL ADDRESS
Marsha J. Middleton	marsha@allianceforlifemissouri.com
PHONE NUMBER	FAX NUMBER
816-806-4168	855-856-5240
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)	
<input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input checked="" type="checkbox"/> IRS Tax-Exempt	
AUTHORIZED SIGNATURE	DATE
<i>Marsha J Middleton</i>	08/11/2017
PRINTED NAME	TITLE
Marsha J. Middleton	CEO

AMENDMENT #002 TO CONTRACT CS1700420001**CONTRACT TITLE:** Alternatives to Abortion Program Services**CONTRACT PERIOD:** July 1, 2017 through June 30, 2018

The State of Missouri hereby exercises its option to renew the above-referenced contract and desires to amend the contract.

Effective July 1, 2017, the administrative responsibilities of the Alternatives to Abortion was transferred from the Office of Administration, Commissioner's Office to the Missouri Department of Social Services at the following address:

Missouri Department of Social Services
Division of Finance and Administrative Services
221 W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

Therefore, the all references to the state agency shall be hereby deemed to mean the Missouri Department of Social Services.

Consequently, Attachment 3 has been revised to refer to the Department of Social Services in lieu of the Office of Administration. All references to Attachment 3 shall be hereby deemed to mean the attached Attachment 3 referencing the Department of Social Services.

The General Assembly has made available additional funds for Alternatives to Abortion Program services. Therefore, pursuant to paragraph 2.12.3 b. of the RFP portion of the contract, the above-referenced contract shall be renewed for up to the maximum annual total price specified below. The contractor shall indicated in the table below the maximum annual total price for the provision of the Alternatives to Abortion Program services. In no event shall the contractor quote a price to exceed the maximum price identified in italics below. The Non-Residential Services, price per client, per month and the Residential Care Services, price per client, per month shall remain the same.

Geographic Region 2	\$220,166.65 _____ maximum annual total price (\$220,166.65)
Geographic Region 3	\$380,681.30 _____ maximum annual total price (\$380,681.30)
Geographic Region 4	\$246,385.92 _____ maximum annual total price (\$246,385.92)
Geographic Region 5	\$133,229.05 _____ maximum annual total price (\$133,229.05)
Geographic Region 6	\$597,304.77 _____ maximum annual total price (\$597,304.77)
Geographic Region 7	\$325,682.73 _____ maximum annual total price (\$325,682.73)
Geographic Region 8	\$74,768.84 _____ maximum annual total price (\$74,768.84)
Geographic Region 9	\$172,118.88 _____ maximum annual total price (\$172,118.88)

The contractor must provide a budget/price analysis of the maximum annual total price and a budget narrative.

Attachment 5, attached hereto, has been revised to reflect the new contract period.

The contractor shall sign and return this document, along with completed pricing, budget/price analysis, and budget narrative, on or before the date indicated.

NOTE: The contractor's failure to complete and return this document shall not stop the action specified herein. If the contractor fails to complete and return this document prior to the return date specified or the effective date of the contract period stated above, whichever is later, the state may renew the contract at the same price(s) as the previous contract period or at the price(s) allowed by the contract, whichever is lower.

Budget Price Analysis
Region 2

Program Salaries and Wages	\$108,420.28
Employee Benefits	\$5,133.54
Employee Travel	\$1,642.73
Employee Training	\$821.37
Office Rent/Space	\$11,909.80
Office Utilities	\$6,365.58
Facility Insurance	\$3,901.49
Office Supplies	\$3,285.46
Equipment	\$616.03
Office Communications	\$616.03
Office repairs/maintenance	\$1,848.07
Contract/consulting	\$41.07
Other	\$0.00
Background Checks	\$61.60
Subcontractor Payment Costs	\$102.67
Janitorial Costs	\$205.34
Depreciation Expense	\$2,258.76
Communication & Technology Support	\$1,642.73
Security/Monitoring Services	\$205.34
TOTAL	\$149,077.89
10% Admin	\$14,907.79
Transportation	\$8,213.66
Job Training	\$616.02
Tuition Assistance	\$2,258.76
Contracted Residential	\$0.00
Utility Assistance	\$8,213.66
Emergency Shelter	\$205.34
Housing Assistance	\$20,130.91
Childcare	\$4,312.17
Clothing	\$320.65
Food	\$1,232.05
Supplies	\$7,802.97
RFO	\$2,874.78
TOTAL	\$56,180.97

Maximum Annual Total Price \$220,166.65

**Budget Price Analysis
Region 3**

Program Salaries and Wages	\$186,378.46
Employee Benefits	\$8,824.74
Employee Travel	\$2,823.92
Employee Training	\$1,411.96
Office Rent/Space	\$20,473.39
Office Utilities	\$10,942.67
Facility Insurance	\$6,706.80
Office Supplies	\$5,647.83
Equipment	\$1,058.97
Office Communications	\$1,058.97
Office repairs/maintenance	\$3,176.91
Contract/consulting	\$70.60
Other	\$0.00
Background Checks	\$105.90
Subcontractor Payment Costs	\$176.49
Janitorial Costs	\$352.99
Depreciation Expense	\$3,882.88
Communication & Technology Support	\$2,823.92
Security/Monitoring Services	\$352.98
TOTAL	\$256,270.38
10% Admin	\$25,627.04
Transportation	\$14,119.58
Job Training	\$1,058.97
Tuition Assistance	\$3,882.88
Contracted Residential	\$0.00
Utility Assistance	\$14,119.58
Emergency Shelter	\$652.80
Housing Assistance	\$36,710.91
Childcare	\$7,412.78
Clothing	\$352.99
Food	\$2,117.94
Supplies	\$13,413.60
RFO	\$4,941.85
TOTAL	\$98,783.88

Maximum Annual Total Price \$380,681.30

**Budget Price Analysis
Region 4**

Program Salaries and Wages	\$120,628.54
Employee Benefits	\$5,711.58
Employee Travel	\$1,827.71
Employee Training	\$913.85
Office Rent/Space	\$13,250.86
Office Utilities	\$7,082.36
Facility Insurance	\$4,340.80
Office Supplies	\$3,655.41
Equipment	\$685.39
Office Communications	\$685.39
Office repairs/maintenance	\$2,056.17
Contract/consulting	\$45.69
Other	\$0.00
ackground Checks	\$68.54
Subcontractor Payment Costs	\$114.23
Janitorial Costs	\$228.46
Depreciation Expense	\$2,513.09
Communication & Technology Support	\$1,827.71
Security/Monitoring Services	\$228.46
TOTAL	\$165,864.24
10% Admin	\$16,586.42
Transportation	\$9,138.53
Job Training	\$685.39
Tuition Assistance	\$2,513.09
Contracted Residential	\$0.00
Utility Assistance	\$9,138.53
Emergency Shelter	\$325.48
Housing Assistance	\$23,760.17
Childcare	\$4,797.73
Clothing	\$325.48
Food	\$1,370.78
Supplies	\$8,681.60
RFO	\$3,198.48
TOTAL	\$63,935.26

Maximum Annual Total Price \$246,385.92

Program Salaries and Wages	\$65,227.86
Employee Benefits	\$3,088.44
Employee Travel	\$988.30
Employee Training	\$494.15
Office Rent/Space	\$7,165.18
Office Utilities	\$3,829.67
Facility Insurance	\$2,347.21
Office Supplies	\$1,976.60
Equipment	\$370.61
Office Communications	\$370.61
Office repairs/maintenance	\$1,111.84
Contract/consulting	\$24.71
Other	\$0.00
Background Checks	\$37.06
Subcontractor Payment Costs	\$61.77
Janitorial Costs	\$123.54
Depreciation Expense	\$1,358.91
Communication & Technology Support	\$988.30
Security/Monitoring Services	\$123.54
TOTAL	\$89,688.30
10% Admin	\$8,968.83
Transportation	\$4,941.50
Job Training	\$370.61
Tuition Assistance	\$1,358.91
Contracted Residential	\$0.00
Utility Assistance	\$4,941.50
Emergency Shelter	\$176.00
Housing Assistance	\$12,847.91
Childcare	\$2,594.29
Clothing	\$176.00
Food	\$741.23
Supplies	\$4,694.43
RFO	\$1,729.54
TOTAL	\$34,571.92

Maximum Annual Total Price \$133,229.05

Budget Price Analysis
Region 6

Program Salaries and Wages	\$292,435.54
Employee Benefits	\$13,846.38
Employee Travel	\$4,430.84
Employee Training	\$2,215.42
Office Rent/Space	\$32,123.60
Office Utilities	\$17,169.51
Facility Insurance	\$10,523.25
Office Supplies	\$8,861.68
Equipment	\$1,661.57
Office Communications	\$1,661.57
Office repairs/maintenance	\$4,984.70
Contract/consulting	\$110.77
Other	\$0.00
Background Checks	\$166.16
Subcontractor Payment Costs	\$276.93
Janitorial Costs	\$553.86
Depreciation Expense	\$6,092.41
Communication & Technology Support	\$4,430.84
Security/Monitoring Services	\$553.84
TOTAL	\$402,098.87
10% Admin	\$40,209.89
Transportation	\$22,154.21
Job Training	\$1,661.57
Tuition Assistance	\$6,092.41
Contracted Residential	\$0.00
Utility Assistance	\$22,154.21
Emergency Shelter	\$789.06
Housing Assistance	\$57,600.94
Childcare	\$11,630.96
Clothing	\$789.05
Food	\$3,323.13
Supplies	\$21,046.50
RFO	\$7,753.97
TOTAL	\$154,996.01

Maximum Annual Total Price \$597,304.77

Budget Price Analysis
Region 7

Program Salaries and Wages	\$159,451.61
Employee Benefits	\$7,549.79
Employee Travel	\$2,415.93
Employee Training	\$1,207.97
Office Rent/Space	\$17,515.52
Office Utilities	\$9,361.74
Facility Insurance	\$5,737.84
Office Supplies	\$4,831.87
Equipment	\$905.98
Office Communications	\$905.98
Office repairs/maintenance	\$2,717.93
Contract/consulting	\$60.40
Other	\$0.00
Background Checks	\$90.60
Subcontractor Payment Costs	\$151.00
Janitorial Costs	\$301.99
Depreciation Expense	\$3,321.91
Communication & Technology Support	\$2,415.93
Security/Monitoring Services	\$301.97
TOTAL	\$219,245.96
10% Admin	\$21,924.60
Transportation	\$12,079.67
Job Training	\$905.98
Tuition Assistance	\$3,321.91
Contracted Residential	\$0.00
Utility Assistance	\$12,079.67
Emergency Shelter	\$430.29
Housing Assistance	\$31,407.13
Childcare	\$6,341.73
Clothing	\$430.28
Food	\$1,811.95
Supplies	\$11,475.68
RFO	\$4,227.88
TOTAL	\$84,512.17

Maximum Annual Total Price \$325,682.73

Budget Price Analysis
Region 8

Program Salaries and Wages	\$36,606.20
Employee Benefits	\$1,733.25
Employee Travel	\$554.64
Employee Training	\$277.32
Office Rent/Space	\$4,021.14
Office Utilities	\$2,149.23
Facility Insurance	\$1,317.27
Office Supplies	\$1,109.28
Equipment	\$207.99
Office Communications	\$207.99
Office repairs/maintenance	\$623.97
Contract/consulting	\$13.87
Other	\$0.00
Background Checks	\$20.80
Subcontractor Payment Costs	\$34.66
Janitorial Costs	\$69.33
Depreciation Expense	\$762.63
Communication & Technology Support	\$554.64
Security/Monitoring Services	\$69.33
TOTAL	\$50,333.54
10% Admin	\$5,033.35
Transportation	\$2,773.20
Job Training	\$207.99
Tuition Assistance	\$762.63
Contracted Residential	\$0.00
Utility Assistance	\$2,773.20
Emergency Shelter	\$98.78
Housing Assistance	\$7,210.31
Childcare	\$1,455.93
Clothing	\$98.77
Food	\$415.98
Supplies	\$2,634.54
RFO	\$970.62
TOTAL	\$19,401.95

Maximum Annual Total Price \$74,768.84

Budget Price Analysis
Region 9

Program Salaries and Wages	\$84,268.00
Employee Benefits	\$3,989.96
Employee Travel	\$1,276.79
Employee Training	\$638.39
Office Rent/Space	\$9,256.70
Office Utilities	\$4,947.55
Facility Insurance	\$3,032.37
Office Supplies	\$2,553.58
Equipment	\$478.80
Office Communications	\$478.80
Office repairs/maintenance	\$1,436.39
Contract/consulting	\$31.92
Other	\$0.00
Background Checks	\$47.88
Subcontractor Payment Costs	\$79.80
Janitorial Costs	\$159.60
Depreciation Expense	\$1,755.58
Communication & Technology Support	\$1,276.79
Security/Monitoring Services	\$159.60
TOTAL	\$115,868.50
10% Admin	\$11,586.85
Transportation	\$6,383.94
Job Training	\$478.80
Tuition Assistance	\$1,755.58
Contracted Residential	\$0.00
Utility Assistance	\$6,383.94
Emergency Shelter	\$227.38
Housing Assistance	\$16,598.24
Childcare	\$3,351.57
Clothing	\$227.37
Food	\$957.59
Supplies	\$6,064.74
RFO	\$2,234.38
TOTAL	\$44,663.53

Maximum Annual Total Price \$172,118.88

Budget Narrative

The maximum annual total price per region breakdown was determined by:

1. The total revenue less the 10% total indirect administrative costs from the Quarterly Expenditure Reports of quarter one and two and finding the percentage spent of that total for each line item on the report.
2. Multiplying the percentage spent of each line item by the maximum annual total price per region being requested.

Example:

Total revenue = \$503,041.63

Program Salaries and Wages for the 2 quarters = \$265,622.14

$\$265,622.14 \div \$503,041.63 = 52.80\%$

Region 2:

Direct Administrative Costs % Total \$149,077.89 + (10% Admin) \$14,907.79 + Participant Costs % Total \$56,180.97 = \$220,166.65 maximum annual total price.

The Alliance for Life will be adding additional subcontractors which will increase the overall number of clients served annually to approximately 1210.

- Average annual residential client cost is estimated to be **\$985,500.00**
(45 annual clients x \$60 per day x 365 days per year)
- Average annual non-residential client cost is estimated to be **\$1,164,838.84**
(1165 annual clients x \$1,000 annual average cost per client)

Maximum annual total price for 8 regions = **\$2,150,338.84**

Non-residential services, price per client per month = **\$83.33**

Residential care services, price per client per month = **\$1,825.00**

Attachment 3

Department of Social Services

Reimbursement Request for Other Services

Program: **Alternatives to Abortion**

Contractor: _____

Subcontractor: _____

Please enter below the information for each item/service to be purchased. List the date of purchase, item to be purchased, cost for the item, and the justification. Items must be approved **before** purchased/provided to be reimbursed.

Client Name _____

Date Enrolled _____

Proposed Purchase Date	Item	Total Cost (include formal estimate from provider of services)	Justification, include other sources of funding that have been attempted
Amt. to be reimbursed			

Under section 2.7.4 of the A2A contract, the following items and services are not eligible for reimbursement: taxes, travel expenses, shipping charges, insurance, interest, penalties, termination payments, attorney fees, and liquidated damages. Please subtract these charges from your total reimbursement request prior to submission.

Please return to Alternatives to Abortion Program Manager, State of Missouri – Department of Social Services, Division of Finance & Administrative Services, Broadway State Office Building, 221 W. High St., Room 310, P.O. Box 1082, Jefferson City, MO 65102-1082. May be faxed to 573/751-7598 or emailed to joy.e.benne@dss.mo.gov by the Contractor only.

Authorized person requesting purchase: _____ Date _____

Purchase is Approved ☐ Denied ☐ A2A Signature _____ Date _____

Reason for denying purchase: _____

Missouri Office of Administration

A2A Quarterly Expenditure Report

Agency: [Insert Agency Name]

Contract Number:

Program Year July 1, 2017 - June 30, 2018

Revenue

Revenue Request

Federal (TANF)

\$ -

Indirect Administrative Costs Calculations

Option 1: Federally Negotiated Indirect Cost Rate (FNICR)

Application Base:

\$ -

Federally Negotiated Indirect Cost Rate (FNICR): %

0.00%

Total Indirect Administrative Costs

\$ -

OR

Option 2: 10% De Minimus (use if no FNICR)

Application Base: Modified Total Direct Administrative Cost

\$ -

10%

Total Indirect Administrative Costs

\$ -

Direct Administrative Costs

Federal (TANF)

Program Salaries and Wages

\$ -

Employee Benefits

\$ -

Employee Travel

\$ -

Employee Training

\$ -

Office Rent/Space

\$ -

Office Utilities

\$ -

Facility Insurance

\$ -

Office Supplies (under \$5,000)

\$ -

Equipment (Capitol Equipment over \$5,000 threshold)

\$ -

Office Communications

\$ -

Office Repairs and Maintenance

\$ -

Contract/Consulting

\$ -

Other (list):

\$ -

(add other categories as needed)

\$ -

Total Direct Administrative Cost

\$ -

Less:

Equipment (Capital Equipment over the \$5,000 threshold)

0

Contracting/Consulting (amount of each contract service over \$25,000)

0

Other based on definition

0

Modified Total Direct Administrative Cost

\$ -

Participant Services

Federal (TANF)

Transportation

\$ -

Job Training

\$ -

Tuition Assistance

\$ -

Contracted Residential Care

\$ -

Utility Assistance

\$ -

Emergency Shelter

\$ -

Housing Assistance

\$ -

(add others as needed)

\$ -

Total Participant Costs

\$ -

I hereby certify that the budget is taken from the original Books of Account and that budget amounts are valid and consistent with the terms of the contract.

Signature of Authorized Representative of [Insert Agency Name]

Date